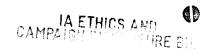
File with: lows Ethics and Gampaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form



FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

2008 MAY 19 PM 4: 15

Fax: 515-281-4073	DISCLOSURI	E SUMMARY PAGE		רויייי (ן	4-15
COMMITTEE NAME (Must b	e same as on Statement of On	ganization)			
Brent Shatto for Sheriff Ca	mpaign		[FORM	
(1)Statewide/Legislative/Judge (4)County Central Committee (of committee you are reporting to Standing for Retention Candidate 5)County Candidate (8)City Can ty PAC (9)City PAC (10)School	r: [5	(DR-2 (Rev. 07/2007) For Office Use On Comm. #	
CANDIDATE COMMITTEES Candidate Name Brent Shatto	ONLY:	Political Party (if applicable) Democrat		Logged In	
Office Sought Sheriff		District (if Senate or House)		Audited	
Late reports are subject to possible Sharp Sharp Signature of Person Fit	to	Pursuant to lowe Code sections 66B.32A 713-309-0555 TELEPHONE	(7) and 6	58A.401(3), the cell 5/19/0 DATE SI	ndidate, for a
I AM FILING A May 19th, 20	008	REPORT FOR (1) ELECTION	/(2)NON	I-ELECTION YEA	AR.
	eport date)	Indicate by #	_		~
CHECK IF AMENDMENT T	O REPORT DATED		Ocel Co	mmittees, enter Dar	a of Election
Check if this is final (termin (You must continue t	ation) report and attach Notice to file reports until a DR-3 is file	of Dissolution Form DR-3.		Local Committees, ection is held	enter County in
STATEM	ENT OF CASH ON HAN	(D			
committee. This am	ning of the reporting period. (1 ount MUST be the same as the period or must be zero if this is	Total of all funds held by the e cash on hand at the end first report filed.)	\$	0.00	
ADD TOTAL MONE	Y TAKEN IN THIS PERIOD				
Schedule A: Cash C	Contributions total (Attach Sche	odule A) ("also see in-kind below)		769.00	
Schedule F: Loans I	Received total (Attach Schedul	le F)		0.00	
Schedule H: Total S	ales of Campaign Property (At	ttach Schedule H)		0.00	
	Happlies to Candidates' Cor	SUB-TOTAL		769.00	
	MONEY SPENT THIS PERIO litures total (Attach Schedule E	ID 3) (**also see debts and loans below)		0.00	
Schedule F: Loan R	epayments total (Attach School	lule F),,,,,		0.00	
CASH ON HAND at the end o	f this reporting period (if final re	eport balance must be zero)	\$	769.00	
UNPAID BILLS (From Sche	dule D - Attach Schedule D)	*************************************	S	0.00	
		edule E)			
"OUTSTANDING LOANS (F	rom Schedule F - Attach Sched	dule F)	\$	0.00	
CONSULTANT BREAKDOW			_	YES	NO
CANDIDATE COMMITTEES	DNLY:				
VALUE OF CAMPAIGN PRO	PERTY (From Schedule H - Al	ttach Schedule H)	\$	0.00	
STATE COMMITTEES: Subm	nlt a reconciled campaign acco	ount bank statement in January of each	ı year,		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)		(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NOING FORM
Brent Shatto for Sheriff Campaign			

SCHEDULE

MONETARY

Reset Form

STATE CANDIDATES MOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE SOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibite the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	VIF FOR FUND- RAISER INCOME
3/22/08	ID#	Steve Schacherer	S7/A	\$100.00	I TOOME
3122/00	CK#	P.O. Box 134 Wallingford, IA 51365	N/A	7.70.00	<u> </u>
	ID#				
03/22/08	CK#	Jerry Johansen R.R. 1	N/A	100.00	
	1D#	Estherville, IA 51334			ļ
04/05/08	CK#	Eric Milburn 1524 Maplecrest Drive Estherville, IA 51334	N/A	20.00	
	ID#	Estherville, IA 3)334			}
04/05/08	CK#	Kent Rouse 3960 260th Street	N/A	400.00	
-	ID#	Graettinger, IA 51342			
04/05/08	CK#	Mark Yackie 202 St. James Avenue	N/A	25.00	
	ID#	Wallingford, IA 51365			
04/05/08	CK#	Delbert Mickelson 108 St. James Avenue	N/A	25.00	
		Wallingford, IA 51365			
04/05/08	ID# CK#	Steve Schacherer P.O. Box 134	N/A	50.00	
	ID#	Wallingford, IA 51365			<u> </u>
04/05/08	CK#	Jim Munsen 513 South 10th Street Estherville, IA 51334	N/A	40.00	
	ID#	Louistving, IA 31334	- 		
	CK#				
	ID#				
04/05/08	ILAF	Unitemized Contributions		2.00	I
	CK#		N/A	9.00	
·	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	\$ 769.00	
	TOTAL (if last page of this schedule)				ł
		(n 1861 h		e 769 00	ł

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

\$ 769.00

FOR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization) Brent Shatto for Sheriff Campaign		(Rev. 06/97)	IN-KIND CONTRIBUTIONS
	Reset Form		K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
03/24/08	Jim Munsen 513 South 10th Street Estherville, IA 51334		Payment of Table Rent. Farm and Home Show	\$ 140.00	
04/02/08	Tera Shatto 4065 210th Street Estherville, IA 51334	Wife	Payment of Newspaper Ads.	96.75	
04/03/08	Tera Shatto 4065 210th Street Estherville, IA 51334	Wife	Payment for Fliers	33.28	
SUB-TOTAL				\$ 270.03	
TOTAL (If last				\$	
			page of this schedule)	270.03	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)